

current bibliographical list is absent and instead one finds a list entitled "Commonly Used Sources." In some places, too much comment is made in apologetic defense of the unity of the book or its individual units. This may be unnecessary, given the fact that the overall presupposition of this series is that the biblical text is approached as it stands at present.

I would like to question a practice followed by this as well as many other commentary series on the Bible. It is customary to strictly follow the canonical order of biblical books when there is a need to put two or three biblical books together in one volume. Thus, books coming from different historical periods are grouped together in one volume. Even though there may be valid reasons to do so, I wonder why we should stick so rigidly to this practice. Would it not be far more practical to devote one volume to Hosea, Amos, and Micah, who were the three eighth-century minor prophets? The first advantage of this order would be that only *one* historical introduction would be needed for all three books. Second, one would find it much easier to draw parallels between the teachings of the three books. More than once in the present volume this is lacking. The same is true for the parallels from Isaiah, God's hatred of religious feasts (111); land-grabbing by the rich (62); mentioning of God's council, *Šod* (181). Themes such as the day of the Lord, rejection of empty worship, etc., lack their parallels with other eighth-century prophets (109-111). Third, some inconsistencies could be avoided like the ones on 23, 171, and 209, which first mention four eighth-century prophets, but then add Jonah to the list as well.

The dating of the three prophetic books is clearly conservative, yet the authors do not consider that the books were written at one sitting. In the case of Amos, it is stated that his reference to Zion shows that when he returned to Judah "there he edited the book" (36). This may explain why Smith does not agree that Amos was "a consistent prophet of doom," and this point makes sense.

Finally, I have found some typos, especially in the commentary on Amos. There are a few incorrect transliterations of Hebrew: *nōdīm* (36), *sūb* (90), *'ōšēh* (101), and *rā'* (106).

I would like to commend both authors for excellent material presented in this volume. The book is suitable as a textbook for seminarians.

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Snyder, Graydon F. *Health and Medicine in the Anabaptist Tradition: Care in Community*. Valley Forge, PA: Trinity Press International, 1995. xvi + 160 pp. Cloth, \$20.00.

Trinity Press International is publishing a series of fourteen volumes on Health and Medicine in various Christian traditions, yet another series of church studies edited in part by Martin E. Marty. Second in this series is Graydon Snyder's contribution on the Anabaptist health tradition.

Snyder's volume contains far more text dealing with Anabaptist community than directly dealing with health issues. For eight chapters Snyder retells the basic nature of Anabaptist community and its impact on health care. There is good

reason for this. In the Anabaptist communions the community is far more tightly woven and of greater importance than in most other Christian traditions. As a result the community looms large in both illness and health care. Often illness is based in part on a sense of separation from, or dishonor within, the community, and healing is effected in part through reconciliation (26-27).

Many Anabaptists find a strong linkage between the anointing of James 5:14 and the forgiveness of sins in verse 15. Snyder tells the story of a young wife in premature labor (31-32). A Brethren doctor knew she had had two previous abortions, and so recommended an anointing service. During the anointing she burst into tears and confessed. She did not confess concerning the abortions, but rather that she and her husband took their honeymoon in New York City, went to a movie there, and afterward conceived this pregnancy. The elder assured her that she was still accepted into the community, and as a result she was able to carry the pregnancy to term. Neither premarital sex nor abortion concerned the woman as much as separation from the community and flouting its rules while away. Healing came with reconciliation.

Community enters all aspects of Anabaptist existence from conception to death. Thus abortion is usually forbidden, as the fetus enters the community from the time the fetus is known to exist. Death is usually viewed in terms of separation from community (46,48). Thus when a dying person is no longer able to take part in community life, there is no reason for continuing bodily life through heroic medical procedures. On the other hand, as long as community is possible euthanasia is unthinkable. Mental illness is likewise seen in terms of community. Even "schizophrenia is a problem of social formation that should be addressed in terms of the patient's social environment" (49).

Snyder touches lightly on shamanism in some Anabaptist traditions. Little is explained and the reader is left wondering how important this aspect of health care is. Snyder does, however, emphasize the important role of community in the shaman's practice. It is always vital that the relationship of the sufferer to the community be established before the shaman can effectively work.

The book is not constructed on a simple linear plan, so that it is difficult to anticipate subject matter or find specific topics without recourse to the index. Also there is a great deal of extraneous material, even when allowance is made for explaining the community life of the Anabaptists. Telling of various mission ventures such as sending cattle overseas does illustrate Anabaptist missions, but does little to further an understanding of Anabaptist health practice.

There are other problems with Snyder's work. He is inconsistent. Though he establishes a strong connection between healing and confession/reconciliation, he later states that Anabaptists understand that "illness has not been caused by personal sin" (64). In both claims some nuance is needed. Snyder also emphasizes "rational" health care in Anabaptist history while downplaying modern shamanistic healing. At times apologetics gets in the way of his study.

Health and Medicine in the Anabaptist Tradition is more an exposition of Anabaptist community than of Anabaptist health care. It is an excellent introduction to the Anabaptist lifestyle, but falls short as a study of its stated topic.